Page 1 of 6

SEC 1972 (6/99)

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL	
OMB Number: 3235-0076	
Expires: May 31, 2002	
Estimated average burden hours per response 1	

SEC USE ONLY								
ļ	Prefix		Serial					
	DAT	E RECEIV	ED					
	<i>D.</i> 11	z .ccci. v						

Name of Offering (check if this is an amendme	ent and name has cha	anged, and indicate o	hange.)		
Common stock offering					
Filing Under (Check box(es) that apply):					
	[ ] <u>Rule 504</u>	[ ] <u>Rule 505</u>	[ X ] <u>Rule 506</u>	[ ] Section 4(6)	[ ] ULOE
Type of Filing: [X] New Filing [] A	mendment				
	A. BA	ASIC IDENTIFICATION	ON DATA		
1. Enter the information requested about the	issuer				
Name of Issuer (check if this is an amendmen AuBeta Networks Corporation	it and name has chan	ged, and indicate ch	ange.)		
Address of Executive Offices (Num 801 South Fidalgo Street, Seattle, WA 98108	nber and Street, City,	State, Zip Code)		none Number (Includii 766-8800	ng Area Code)
Address of Principal Business Operations (if different from Executive Offices)	(Number and St	reet, City, State, Zip	Code) l'elepi	none Number (Includi	PROCESSED
Same					CCD () & 2002
Brief Description of Business Provide					LED A STORE
Wide Area Network Services					THOMSON
Type of Business Organization					FINANCIAL
[X] corporation		nership, already form		other (please specify):	
[ ] business trust	[ ] limited partr	nership, to be formed			
Actual or Estimated date of Incorporation or C Jurisdiction of Incorporation or Organization: CN f		Postal Service abbre		[ X ] Actual	[ ] Estimated

# **GENERAL INSTRUCTIONS**

# Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed be photocopies of manually signed copy or bear typed or printed signatures.

Form D

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

# A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer:
  - Each executive officer and director of cornorate issuers and of cornorate general and managing partners of partnership issuers:

and  • Each general and m			corporate general and m	anaging partiers or p	variation in products,
Check Box(es) that Apply:	[] Promoter	[ ] Beneficial Owner	[ ] Executive Officer	[X ] Director [ ]	General and/or Managing Partner
Full Name (Last name first, if i Hernandez, E. Norman	ndividual)				
Business or Residence Address 801 South Fidalgo Street, Sea		reet, City, State, Zip Coo	le)		
Check Box(es) that Apply:	[] Promoter	[ ] Beneficial Owner	[ ] Executive Officer	[X] Director []	General and/or Managing Partner
Full Name (Last name first, if i Henkel, Stephen					
Business or Residence Addres 4 Holly Hill Drive, Mercer Islan		reet, City, State, Zip Coo	de)		
Check Box(es) that Apply:	[] Promoter	[ ] Beneficial Owner	[ ] Executive Officer	[X ] Director [ ]	General and/or Managing Partner
Full Name (Last name first, if i Harrison, George	ndividual)				
Business or Residence Addre 33818 Crystal Mountain Drive			le)		
Check Box(es) that Apply:	[] Promoter	[ ] Beneficial Owner	[ ] Executive Officer	[X ] Director [ ]	General and/or Managing Partner
Full Name (Last name first, if i Smith, Stewart	ndividual)				
Business or Residence Addre 11855 Holmes Point Dr. NE, k			de)		
Check Box(es) that Apply:	[] Promoter	[ ] Beneficial Owner	[ ] Executive Officer	[X] Director []	General and/or Managing Partner
Full Name (Last name first, if i Duff, George	individual)				
Business or Residence Addre 3217 84 <sup>th</sup> Ave SE, Mercer Isla		reet, City, State, Zip Coo	ie)		
Check Box(es) that Apply:	[] Promoter	[ ] Beneficial Owner	[ ] Executive Officer	[X] Director []	General and/or Managing Partner
Full Name (Last name first, if i Nordstrom, Jamie	individual)				
Business or Residence Addre 3865 West Mercer Way, Merc			de)		en e
Check Box(es) that Apply:	[] Promoter		[ ] Executive Officer	[X] Director []	General and/or Managing Partner
Full Name (Last name first, if i Brennan, Don	individual)				, ,
Business or Residence Addre 4638 156 <sup>th</sup> Place SE, Bellevue	ss (Number and St	treet, City, State, Zip Coo	de)		
		eet, or copy and use ac	ditional copies of this	sheet, as necessary	')

Form D					R	INFORMA	TION ARC	OUT OFFE	PING				Page 3 of 6
1. Has t	he issuer	sold, or do		uer intend	to sell, to n	on-accred	ited invest	ors in this o			<del></del>	Yes	No
2. What	is the min	imum inve		er also in A at will be a								\$ 30,00	
3. Does	the offerir	ng permit j	oint owner	ship of a s	ingle unit?.								No [ ]
commiss person to states, lis	sion or sim to be listed st the nam	ilar remur is an asso e of the b	neration for ociated per roker or de	solicitation	n of purcha ent of a bro re than five	sers in co ker or dea (5) perso	nnection w ler register ns to be lis	rith sales of red with the	f securities SEC and	ndirectly, a s in the offe d/or with a s persons of s	ering. If a state or		
					44								
None			f individua										
Business	s or Reside	ence Addr	ress (Numb	per and Str	eet, City, S	State, Zip (	Code)						
Name of	Associate	ed Broker	or Dealer										
				icited or In States)		olicit Purch	nasers				[ ] All	States	
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[iD] [MO] [PA] [PR]	
Full Nam	ne (Last na	ame first, i	f individua	l) 									
Business	s or Resid	ence Addı	ress (Numi	per and Str	eet, City, S	State, Zip (	Code)						
Name of	Associate	ed Broker	or Dealer										
			ed Has Sol individual [AR] [KS] [NH] [TN]	icited or In States) [CA] [KY] [NJ] [TX]	tends to So [CO] [LA] [NM] [UT]	olicit Purch [CT] [ME] [NY] [VT]	DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[ ] All [HI] [MS] [OR] [WY]	States [ID] [MO] [PA] [PR]	
Full Nam	ne (Last na	ame first, i	f individua	1)									
Business	s or Resid	ence Addı	ress (Numl	ber and Str	eet, City, S	State, Zip (	Code)					, , , , ,	
Name of	Associate	ed Broker	or Dealer	<del></del>									
				licited or In States)		olicit Purch	nasers				[ ] All	States	
(Glicon [AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
· · · · · · · · · · · · · · · · · · ·	<u> </u>									et, as nece			
already s check th	sold. Enter	"0" if ans id indicate ady excha	ing price of wer is "note in the col	f securities ne" or "zero umns belov	included i o." If the tra	n this offer ansaction i	ring and th s an excha	e total amo	ount ng,	Ag	gregate		Amount Already Sold
										\$\$ \$ 1,500		\$_ \$	550,502
	, ,		[X ] Con		[] Prefer	red				\$	,000	_	000,002
	Partners	ship Intere	sts		· · · · · · · · · · · · · · · · · · ·					\$ \$		\$_ \$_	
				pendix, Co			r I II OE			\$			•
this offer indicate	ring and th the numbe	er of accr e aggrega er of perso	edited and ate dollar a ons who ha	non-accre mounts of eve purcha r "0" if ans	dited inves their purch sed securi	stors who I lases. For ties and th	nave purch offerings u e aggregat	ınder Rule	504,				

Accredited Investors.....

Aggregate Dollar Amount of Purchases \$ 550,502

Number Investors

Form D			Page 4 of 6
Non-accredited Investors			\$
Total (for filings under Rule 504 only)		7	\$ 550,502
Answer also in Appendix, Column 4, if fill 3. If this filing is for an offering under Rule 504 or 505, enter t securities sold by the issuer, to date, in offerings of the types i prior to the first sale of securities in this offering. Classify securities in the control of the first sale of securities in this offering.	ing under ULOE. he information requested for all indicated, the twelve (12) months		ф 330,302 <u> </u>
		Type of Security	Dollar Amount
Type of offering		Type of Security	Sold
Rule 505Regulation A			\$
Rule 504			\$
Total			\$
Securities in this offering. Exclude amounts relating solely to a The information may be given as subject to future contingenci is not known, furnish an estimate and check the box to the left Transfer Agent's Fees	organization expenses of the issuer. ies. If the amount of an expenditure t of the estimate.	1.1	\$
Printing and Engraving Costs		i i	\$
Legal Fees		[X]	\$10,000 \$
Engineering Fees		įį	\$
Sales Commissions (specify finders' fees separatel Other Expenses (identify)	y) 	[ ]	\$ \$
Total		į į	\$10,000
b. Enter the difference between the aggregate offering price of Question 1 and total expenses furnished in response to Part of the "adjusted gross proceeds to the issuer."			\$
5. Indicate below the amount of the adjusted gross proceeds used for each of the purposes shown. If the amount for any p estimate and check the box to the left of the estimate. The to the adjusted gross proceeds to the issuer set forth in respons	ourpose is not known, furnish an tal of the payments listed must equal		
g		Payments to	Payments
		officers, Directors, &	To Others
		Affiliates	r1
Salaries and fees		[ ] \$	[] \$
Purchase of real estate		[] \$	[] \$
Purchase, rental or leasing and installation of machinery			[]
and equipment		\$[]	\$
Construction or leasing of plant buildings and facilities		\$	\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer		[]	[]
pursuant to a merger)		\$	\$
Repayment of indebtedness		[] \$	\$
Working capital		[] \$	[] \$ 1,490,000
Other (specify):	<del></del>		[]
	<del></del>	\$ []	\$ []
Column Totals Total Payments Listed (column totals added)		\$[]\$	\$ 1,490,000
Total Fayments Listed (Column totals added)			
	D. FEDERAL SIGNATURE	:	705 the fellowing
The issuer has duly caused this notice to be signed by the un signature constitutes an undertaking by the issuer to furnish to information furnished by the issuer to any non-accredited investigation.	o the U.S. Securities and Exchange Co	mmission, upon written req	
Issuer (Print or Type) AuBeta Networks Corp	Signature Solut	,	Date January 23, 2002
Name of Signer (Print or Type) Robert L. Gerth	Title of Signer (Print or Type) C	hief Financial Officer	

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ATTENTION	
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)	

E. STATE SIGNATURE			
Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No [X ]	
See Appendix, Column 5, for state response.	FI	[~]	

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print) or Type) AuBeta Networks Corp	Signature Court A.	Date January 23, 2002
Name of signer (Print or Type)	Title (Print or Type) Chief Financial Officer	
Robert L. Gerth		

## Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX

1		2	3	4				5	·
	accredited St	sell to non- investors in tate 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item)	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULO (if yes, attach explanation of waiver granted) (Part E-Item 1)	
				Number of Accredited		Number of Non- Accredited			
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
AL		· · · · · · · · · · · · · · · · · · ·							
AK									
AZ									
AR									
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